FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPI	ROVAL				
OMB Number:	3235-0076				
Expires:	May 31, 2005				
Estimated average burden					
hours per respo	nse16.00				

SEC USE C	ONLY
Prefix	Serial
· _ ·	
DATE RECEI	IVED
1	1

SECTION 4(0), AND/OR	DATE RECEIVED
WASH., D.C. UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	י ופבונו בבוום וובוו בבווו בפווב פעעו בבווו ומבו בבווו ובבוו בבווו ובבבון ובנון ומבן
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	02075078
Haverford Realty Investors, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 400 Continental Blvd., Suite 160, El Segundo, California 90245	Telephone Number (including Area Code) 310-416-1130
Address of Principal Business Operations (Number and Street, City. State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Investment in equity and equity-related securities	
	PDOS
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	PROCESSI DEC 3 0 2002
Actual or Estimated Date of Incorporation or Organization: Month	imated HOMSON
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 17d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street. N.W. Washington, D.C 20	0549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually shotocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
information Required: A new filing must contain all information requested. Amendments need only reponents, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for si	ales of securities in those states that have adopted

- ATTENTION -

ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

BASIC IDENTIFICATION DATA							
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director X	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Haverford Realty Capital, L.L.C.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
400 Continental Blvd., Suite 160, El Segundo, California 90245 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ▼ Executive Officer ▼ I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Blenko, David B.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
400 Continental Blvd., Suite 160, El Segundo, California 90245							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Berlinger, Steven A. Business or Residence Address (Number and Street, City, State, Zip Code)							
400 Continental Blvd., Suite 160, El Segundo, California 90245							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Bookstein, Harvey							
Business or Residence Address (Number and Street, City, State, Zip Code)							
400 Continental Blvd., Suite 160, El Segundo, California 90245 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ▼ I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Long, John S.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
400 Continental Blvd., Suite 160, El Segundo, California 90245		· · · · · · · · · · · · · · · · · · ·					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer I	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							

-				В.	INFORMA	TION ABO	OUT OFFER	RING				
I . Has the	issuer sol	d, or does	the issuer	intend to s	sell, to non	-accredited	d investors	in this off	ering?		Yes	No 🔀
I . Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									<u> </u>			
2. What is the minimum investment that will be accepted from any individual?							s <u>10</u>	0,000				
3. Does the offering permit joint ownership of a single unit?						Yes	No					
commiss If a pers or states	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. It more than five (5) persons to be listed are associated persons of such a broker or dealer. you may set forth the information for that broker or dealer only.											
Full Name	(Last name	e first, if in	dividual)									
Metropol				_						. 8.10		
Business o			-		•		0.1500					
			e, Suite 20	0, Larksp	ur, Califo	mia 9493	9-1703				•	
Name of A N/A	ssociated	Broker or	Dealer									
States in V	Vhich Pers	on Listed l	Has Solicite	ed or Inten	ds to Solic	it Purchase	rs				***	
			k individua							•••••		All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[QA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[D C] [MA] [ND] [WA]	[FL] [MI] [NH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last name	e first, if in	dividual)									
Business o	r Residenc	e Address	(Number a	and Street,	City, State	, Zip Code)					
Name of A	ssociated	Broker or l	Dealer									
States in V	Vhich Pers	on Listed	Has Solicit	ed or Inten	ds to Solic	it Purchase	ers					
(Chec	k "All Stat	es" or chec	k individua	l States)							🏻 A	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL] [MI] [NH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last name	e first. if in	dividual)		· · ·			·	<u> </u>			
Business o	r Residenc	e Address	(Number a	and Street,	City, State	, Zip Code)					
Name of A	ssociated	Broker or	Dealer					·				
States in V	Vhich Pers	on Listed	Has Solicit	ed or Inter	ds to Solic	it Purchase	ers					
			k individua									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	[ID]
[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [NH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

 $^{^{3}}$ of 9 * The general partner of the issuer is solely responsible for the payment of the renumeration to the solicitor. None of the proceeds from the investments described in this offering will be used for payment of renumeration to the solicitor.

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1 .	. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	A agus anta	A
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u>0</u>	<u> </u>
	Equity	<u>\$_0</u>	_ S <u>o</u>
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	<u> </u>
	Partnership Interests	3,401,000	S 3,401,000
	Other (Specify)	<u> </u>	<u>S</u> 0
	Total		
	Answer also in Appendix, Column 3. if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is *'none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors.	5	\$ 3,401,000
	Non-accredited Investors	0	<u> </u>
	Total (for filings under Rule 504 only)	0	<u>s_o</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		. s
	Regulation A		. s
	Rule 504	<u> </u>	S
	Total		. S
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	Г] \$
	Printing and Engraving Costs	_	_
	Legal Fees.		S 10,000
	Accounting Fees		
	Engineering Fees	_	s
	Sales Commissions (specify finders' fees separately)	_] S
	Other Expenses (identify) Blue Sky fees	-	S 550
	Total	-	S 10,550

b. Enter the difference between the aggregate offering price given in response to Part CQue and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished and total expenses furnished and total expenses furnished in response to Part CQuestion 4.a. This difference is the "adjusted and total expenses furnished and total expense			
proceeds to the issuer."	ed gross		s <u>3,390,450</u>
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be u each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjuste proceeds to the issuer set forth in response to Part CQuestion 4.b above.	ate and		
		Payments to Officers. Directors, & Affiliates	Payments to Others
Salaries and fees		S	
Purchase of real estate	🗀 :	S	_ 🗆 S
Purchase, rental or leasing and installation of machinery and equipment		s	_ 🔲 S
Construction or leasing of plant buildings and facilities			
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	["]	ς .	- □s
Repayment of indebtedness			. —
Working conital		•	
Other (specify): Real estate investments		\$	□ \$ 3,390,450
		× <u> </u>	-
		S <u> </u>	_
Column Totals		s	≥ \$ 3,390,450
Total Payments Listed (column totals added)			390,450
D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Countries the information furnished by the issuer to any non-accredited investor-pursuant to paragraph (b)(2 like) Issuer (Print or Type) Signature	Commission	n, upon writter 02.	
Haverford Realty Investors, L.P.	1 1 7	vember 26 , 2	2002
Name of Signer (Print or Type) David Blenko Title of Signer (Print or Type) By: Haverford Realty Capital, L.L.C. Its: General Partner			

By: David Blenko Its: President

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)